

**PART B - FEE(S) TRANSMITTAL**

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7590                    05/24/2005

**AGILENT TECHNOLOGIES, INC.**  
Legal Department, DL429  
Intellectual Property Administration  
P.O. Box 7599  
Loveland, CO 80537-0599

07/07/2005 TBESHAWZ 00000021 501078 10648554

01 FC:1501 1400.00 DA

02 F1:1504 300.00 DA

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
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10648554

08/25/2003

Russell W. Gruhlke

10020858-1

5174

TITLE OF INVENTION: MULTI-FOCAL LENGTH MINIATURE REFRACTIVE ELEMENT AND METHOD FOR MAKING THE SAME

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
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nonprovisional	NO	\$1400	\$300	\$1700	08/24/2005
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EXAMINER	ART UNIT	CLASS-SUBCLASS
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CHOI, WILLIAM C	2873	359-721000
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1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.563).

2. For printing on the patent front page, list

- Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
  - "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47, Rev 03-02 or more recent) attached. Use of a Customer Number is required.
- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 \_\_\_\_\_

2 \_\_\_\_\_

3 \_\_\_\_\_

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

**AGILENT TECHNOLOGIES, INC.**

**Palo Alto, California**

Please check the appropriate assignee category or categories (will not be printed on the patent):  Individual  Corporation or other private group entity  Government

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The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-1078 (enclose an extra copy of this form).

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a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature \_\_\_\_\_

Date 7-1-05

Typed or printed name Juergen Krause-Polskoff

Registration No. 41,127

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